

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Mississippi Republican Party

ADDRESS (number and street) ▼

P. O. Box 60

☐ Check if different than previously reported. (ACC)

Jackson

MS

39205-0060

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00084368

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul V. Breazeale

Signature of Treasurer

Paul V. Breazeale

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mississippi Republican Party

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 / 01 / 2014

To:

 M M / D D / Y Y Y Y Y
 07 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		35721.88
(b) Cash on Hand at Beginning of Reporting Period.....	45136.54	
(c) Total Receipts (from Line 19)	35613.16	273646.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	80749.70	309368.73
7. Total Disbursements (from Line 31)	40321.13	268940.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40428.57	40428.57
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2897.88	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Mississippi Republican Party

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 07 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 07 / 31 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

26560.00

134115.00

(ii) Unitemized

5301.00

88916.12

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

31861.00

223031.12

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

11340.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

31861.00

234371.12

12. Transfers From Affiliated/Other

Party Committees.....

3750.00

15000.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

167.12

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.16

16.56

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

24092.05

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

24092.05

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

35613.16

273646.85

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

35613.16

249554.80

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	2371.53	28124.59
(ii) Non-Federal Share.....	8921.42	71757.26
(b) Other Federal Operating Expenditures	11415.44	70360.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	22708.39	170242.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	17612.74	98697.90
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	17612.74	98697.90
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	40321.13	268940.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31399.71	197182.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31861.00	234371.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31861.00	234371.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	13786.97	98485.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	167.12
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	13786.97	98317.88

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

We are still experiencing a database issue and the debt should be 4126.93 and due to this problem the memo items for the credit card payments are not pulling through. As soon as we resolve this issue we will amend our report show both the correct debt total and the memo entries. Cash on hand and summary page totals except for debt are correct.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Steve Guyton

Mailing Address 1865 Lakeland Drive, #110

City State Zip Code
 Jackson MS 39216

FEC ID number of contributing federal political committee.

C

Name of Employer

Mississippi Republican Party

Occupation

Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 02 2014

Transaction ID : A866CBF9F5A5A4CD282A

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

B. Henry Barbour

Mailing Address 685 Woodland Drive

City State Zip Code
 Yazoo City MS 39194

FEC ID number of contributing federal political committee.

C

Name of Employer

Capitol Resources, LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : A3D2B04AFADD94419AB9

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Veronica Naylor

Mailing Address 206 Breezy Hill Drive

City State Zip Code
 Madison MS 39110

FEC ID number of contributing federal political committee.

C

Name of Employer

Associate Resources Group

Occupation

Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 03 2014

Transaction ID : A7CB4CCD2B84A4A01BD7

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Wallace Carter

Mailing Address 604 Rue Maupasant

City State Zip Code
 Ocean Springs MS 39564

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5140.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : A025514FC2E1E4B988ED

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Geraldine Donovan

Mailing Address 202 Weathersby Road

City State Zip Code
 Hattiesburg MS 39402

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : AA52EF99481F745B086A

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Hilda Povall

Mailing Address P.O. Box 1199

City State Zip Code
 Cleveland MS 38732

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : A8EA29564C7C8409A90C

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. John Taylor

Mailing Address 104 Hidden Heights

City State Zip Code
 Ridgeland MS 39157

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Taylor Industries, LLC

Occupation
 Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : A1C6A45E2694647FEB38

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. James Moreton

Mailing Address P. O. Box 537

City State Zip Code
 Brookhaven MS 39602-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
 N/A

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : ACBA8BC37952A41D2AD9

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Lanny Griffith, Jr.

Mailing Address 625 Oakland Terrace

City State Zip Code
 Alexandria VA 22302

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Barbour, Griffith & Rogers

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : A393A6E5A5950407E91F

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Noel Coward

Mailing Address 10576 Cambrooke Cv

City State Zip Code
 Collierville TN 38017-3600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cellular South

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 03 / 2014

Transaction ID : AD8EEA9A667CB48A78F5

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. John Palmer

Mailing Address P. O. Box 3747

City State Zip Code
 Jackson MS 39207-3747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf South Capital

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

07 / 03 / 2014

Transaction ID : A5ECFD8F490764B18B44

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Charlie Williams

Mailing Address P. O. Box 946

City State Zip Code
 Senatobia MS 38668

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 03 / 2014

Transaction ID : ADB1C4E329F084B828DA

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 33
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. William Mounger

Mailing Address 4450 Old Canton Rd., Ste. 203

City State Zip Code
 Jackson MS 39211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5350.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : AA451D26B28A34431B03

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. William Billingsley

Mailing Address 569 N Old Canton Rd

City State Zip Code
 Madison MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : AF87BE83843F3430EA4B

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. J. W. Pressler

Mailing Address 807 Hickory Avenue

City State Zip Code
 Mc Comb MS 39648-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
 07 / 03 / 2014

Transaction ID : AE572A5B440F1471686A

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Wirt Yerger, Jr.

Mailing Address 129 Woodland Circle

City

Jackson

State

MS

Zip Code

39216-4194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5295.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : A702E3BA03BE849B5BC1

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Joel Bomgaars

Mailing Address 357 Kiowa Drive

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bomgar Corporation

Occupation

Founder & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1675.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : ADC869C4E7D8445708BD

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Drew St. John II

Mailing Address 100 Covington Bend

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

New South Equipment Mats

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : A132BA93D863C4A4B853

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Greg Snowden

Mailing Address P. O. Box 3807

City

Meridian

State

MS

Zip Code

39303-3807

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2014

Transaction ID : A539171636CB44BA3AE3

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Marsha Barbour

Mailing Address 648 Dogwood Drive

City

Yazoo City

State

MS

Zip Code

39194

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 07 / 2014

Transaction ID : AB57A8D82795745EAB7F

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Haley Barbour

Mailing Address 648 Dogwood Drive

City

Yazoo City

State

MS

Zip Code

39194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Butler, Snow And O'mara

Occupation

lobbyist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

9875.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 07 / 2014

Transaction ID : A484D349B88E34F22B69

Amount of Each Receipt this Period

9700.00

SUBTOTAL of Receipts This Page (optional)..... ►

10030.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. George Walker, III

Mailing Address 2000 Culleywood Road

City State Zip Code
 Jackson MS 39211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heritage Properties

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
 07 / 09 / 2014

Transaction ID : AAEF36413182E45B4B34

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Larry Byrd

Mailing Address 17 Byrd

City State Zip Code
 Petal MS 39465

FEC ID number of contributing
federal political committee.

C

Name of Employer

MS House of Rep.

Occupation

Legislator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
 07 / 16 / 2014

Transaction ID : AC52C852BC28A423899A

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. Rob Wells

Mailing Address 226 Westfield Road

City State Zip Code
 Ridgeland MS 39157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Young Williams Child Support S

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
 07 / 28 / 2014

Transaction ID : A3816841C62EF4935BBB

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15240.00

26560.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 33

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Republican National Committee

Mailing Address 310 First Street, S.E.

City

Washington

State

DC

Zip Code

20003-1885

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : AE545D273A02B40899DF

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3750.00

3750.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Mississippi Republican Party

A. Mississippi Department of Employment Security

Category/
Type

5.86

State: District:

B. Internal Revenue Service

07 / 01 / 2014

Category/
Type

1516.11

State: District:

C. Mississippi Department of Revenue

Category/
Type

246.00

State: District:

1767.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address P. O. Box 70503

City	State	Zip Code
Charlotte	NC	28272-0503

Purpose of Disbursement
001-Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : B3889F59661714D62BAA

Amount of Each Disbursement this Period

605.64

Full Name (Last, First, Middle Initial)

B. Mississippi Department of Revenue

Mailing Address P. O. Box 960

City	State	Zip Code
Jackson	MS	39205-0960

Purpose of Disbursement
001-Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : BA2B76D9509A04D49892

Amount of Each Disbursement this Period

187.00

Full Name (Last, First, Middle Initial)

C. Blue Cross & Blue Shield of MS

Mailing Address P. O. Box 23082

City	State	Zip Code
Jackson	MS	39225-3082

Purpose of Disbursement
001-Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2014

Transaction ID : BB04DD4927F2F470089B

Amount of Each Disbursement this Period

955.40

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1748.04

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Mississippi Republican Party

3500.00

247.50

1736.69

The diagram shows a 16-bit bus structure. It consists of a top horizontal line with 16 small vertical tick marks, representing data lines. Below this is a bottom horizontal line with 16 small vertical tick marks, also representing data lines. Between these two lines, there are three additional horizontal lines, each with a single small vertical tick mark, representing control lines.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 33

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 5680 New Northside Drive

City Atlanta	State GA	Zip Code 30328-4668
-----------------	-------------	------------------------

Purpose of Disbursement
001-Payroll Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : BDB13ED463A2A47E5BE1

Amount of Each Disbursement this Period

191.60

Full Name (Last, First, Middle Initial)

B. Mississippi Department of Revenue

Mailing Address P. O. Box 960

City Jackson	State MS	Zip Code 39205-0960
-----------------	-------------	------------------------

Purpose of Disbursement
001-Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : BCFD3A1C43D9B429AA4F

Amount of Each Disbursement this Period

308.00

Full Name (Last, First, Middle Initial)

C. Mississippi Department of Employment Security

Mailing Address P O Box 22781

City Jackson	State MS	Zip Code 39225-2781
-----------------	-------------	------------------------

Purpose of Disbursement
001-Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : B30CD1789CB2E405BA35

Amount of Each Disbursement this Period

4.88

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

504.48

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 33

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. ADP, Inc.

Mailing Address 5680 New Northside Drive

City

Atlanta

State

GA

Zip Code

30328-4668

Purpose of Disbursement

001-Payroll Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
07D D D /
18Y Y Y Y Y Y
2014**Transaction ID : BDC2FAF83D7884F6E8ED**

Amount of Each Disbursement this Period

99.52

Full Name (Last, First, Middle Initial)

B. Mississippi Department of Revenue

Mailing Address P. O. Box 960

City

Jackson

State

MS

Zip Code

39205-0960

Purpose of Disbursement

001-Payroll Taxes

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
07D D D /
31Y Y Y Y Y Y
2014**Transaction ID : B6F26FC02B5954546805**

Amount of Each Disbursement this Period

203.00

Full Name (Last, First, Middle Initial)

C. Mississippi Department of Employment Security

Mailing Address P O Box 22781

City

Jackson

State

MS

Zip Code

39225-2781

Purpose of Disbursement

001-Payroll Taxes

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
07D D D /
31Y Y Y Y Y Y
2014**Transaction ID : B35BB1130B8F14899B32**

Amount of Each Disbursement this Period

1.35

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

303.87

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 33

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address P. O. Box 70503

City Charlotte State NC Zip Code 28272-0503

Purpose of Disbursement
001-Payroll Taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : B3A87BC29675A46FCB0F

Amount of Each Disbursement this Period

1296.94

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1296.94

11105.49

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Gordon McMullin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : B4A57C28162404C5F8E9

Amount of Each Disbursement this Period

973.54

Full Name (Last, First, Middle Initial)

B. Laura W Russell

Mailing Address 2344 Twin Lakes Circle

City Jackson	State MS	Zip Code 39211-6760
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : BBC88983C673C4C63B19

Amount of Each Disbursement this Period

1030.04

Full Name (Last, First, Middle Initial)

C. Brandon Payne

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : B928C158450FC41919CE

Amount of Each Disbursement this Period

3468.51

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5472.09

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Bobby Morgan

Mailing Address 1916 Aztec Drive

City Jackson	State MS	Zip Code 39211-6505
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : B6F5CC2E4FA26460FA0C

Amount of Each Disbursement this Period

1246.58

Full Name (Last, First, Middle Initial)

B. John Griffin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : B02C650247BF94430AB5

Amount of Each Disbursement this Period

1274.81

Full Name (Last, First, Middle Initial)

C. Laura W Russell

Mailing Address 2344 Twin Lakes Circle

City Jackson	State MS	Zip Code 39211-6760
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : BEF4DD1F6EC2A4E12917

Amount of Each Disbursement this Period

1030.05

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3551.44

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. John Griffin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : BE6DC20A9AA6E4B21ABA

Amount of Each Disbursement this Period

1274.82

Full Name (Last, First, Middle Initial)

B. Bobby Morgan

Mailing Address 1916 Aztec Drive

City Jackson	State MS	Zip Code 39211-6505
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : B611AC1EC01844A89B66

Amount of Each Disbursement this Period

1246.59

Full Name (Last, First, Middle Initial)

C. Gordon McMullin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
-----------------	-------------	------------------------

Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : B0CF683EA989045CC8D0

Amount of Each Disbursement this Period

973.53

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3494.94

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 33

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. Brandon Payne

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
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Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

State: District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2014

Transaction ID : BE9317FEF84C443D7A10

Amount of Each Disbursement this Period

1287.64

Full Name (Last, First, Middle Initial)

B. Laura W Russell

Mailing Address 2344 Twin Lakes Circle

City Jackson	State MS	Zip Code 39211-6760
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Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

State: District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : B461F40D48BD14BE58EC

Amount of Each Disbursement this Period

311.66

Full Name (Last, First, Middle Initial)

C. Gordon McMullin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
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Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

State: District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2014

Transaction ID : BB792D0DA14694FAC916

Amount of Each Disbursement this Period

973.54

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2572.84

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Full Name (Last, First, Middle Initial)

A. John Griffin

Mailing Address P.O. Box 60

City Jackson	State MS	Zip Code 39205-0060
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Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : B47B09D1BC5FF4915824

Amount of Each Disbursement this Period

1274.83

Full Name (Last, First, Middle Initial)

B. Bobby Morgan

Mailing Address 1916 Aztec Drive

City Jackson	State MS	Zip Code 39211-6505
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Purpose of Disbursement
FEA Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2014

Transaction ID : B9DCC5499EEDE4432AA3

Amount of Each Disbursement this Period

1246.60

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2521.43

17612.74

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 OF 33

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Bankcard

Nature of Debt (Purpose):
001-Credit Card Debt

Mailing Address P.O. Box 2557

City State
OmahaZip Code
NE 68103-2557

Outstanding Balance Beginning This Period

9138.58

Transaction ID : DD8ECF6DA077541C99F0

Amount Incurred This Period

0.00

Payment This Period

6240.70

Outstanding Balance at Close of This Period

2897.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

2897.88

2) **TOTALS** This Period (last page this line number only)..... ►

2897.88

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

2897.88

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

Transaction ID : Hb4bdae1303f3488088

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

☒ _____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐
or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Charlie Mathews Landscaping		Transaction ID : HDF9468B26FA047B3AAF		Allocated Activity or Event:	
Mailing Address P.O. Box 2482				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Ridgeland		State MS	Zip Code 39158-2482	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Lawn Care				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 86726.54	
Date		Date		Date	
07 / 10 / 2014		07 / 10 / 2014		07 / 10 / 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
42.00		158.00		200.00	

B. Full Name (Last, First, Middle Initial) Comcast		Transaction ID : H850D8CB019394F14B6B		Allocated Activity or Event:	
Mailing Address P.O. Box 105184				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Atlanta		State GA	Zip Code 30348-5184	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Cable				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 86726.54	
Date		Date		Date	
07 / 10 / 2014		07 / 10 / 2014		07 / 10 / 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
27.68		104.13		131.81	

C. Full Name (Last, First, Middle Initial) Waste Management of Jackson MS Hauling		Transaction ID : HFBFAD457D31D4D4F88A		Allocated Activity or Event:	
Mailing Address PO Box 9001054				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Louisville		State KY	Zip Code 40290-1054	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Waste Management				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 86726.54	
Date		Date		Date	
07 / 10 / 2014		07 / 10 / 2014		07 / 10 / 2014	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
19.87		74.74		94.61	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.55		336.87		426.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) R. J. Young		Transaction ID : H7D071B5F388C49E2939		Allocated Activity or Event:	
Mailing Address 809 Division Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Nashville		State TN	Zip Code 37203-4108	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Equipment Lease				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date <div>86726.54</div>	
Date		Date		Date	
MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
58.74		220.96		279.70	

B. Full Name (Last, First, Middle Initial) Southern Telecommunications		Transaction ID : H0E4DBBCB559B4578B00		Allocated Activity or Event:	
Mailing Address P.O. Box 12865				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson		State MS	Zip Code 39236	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Phone Service				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date <div>86726.54</div>	
Date		Date		Date	
MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
96.55		363.22		459.77	

C. Full Name (Last, First, Middle Initial) FP Mailing Solutions		Transaction ID : H9A12EA4A31D74ED898E		Allocated Activity or Event:	
Mailing Address P.O. Box 4510				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Carol Stream		State IL	Zip Code 60197-4510	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Postage Meter Machine				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date <div>86726.54</div>	
Date		Date		Date	
MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014		MM / DD / YYYY 07 / 10 / 2014	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
29.90		112.50		142.40	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
185.19	696.68	881.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Hinds County Tax Collector		Transaction ID : HB3A49B8A7DC44005B1F		Allocated Activity or Event:	
Mailing Address P. O. Box 1727				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson		State MS		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 39215-1727				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 001-Property Taxes & Interest				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		86726.54	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
611.73		2301.27		2913.00	

B. Full Name (Last, First, Middle Initial) First Bankcard		Transaction ID : H7005CA043A254580895		Allocated Activity or Event:	
Mailing Address P.O. Box 2557				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Omaha		State NE		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 68103-2557				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 001-Credit Card Payment				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		86726.54	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
840.00		3160.00		4000.00	

C. Full Name (Last, First, Middle Initial) First Bankcard		Transaction ID : HB5295947E1C24A04B15		Allocated Activity or Event:	
Mailing Address P.O. Box 2557				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Omaha		State NE		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 68103-2557				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: 001-Credit Card Payment				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: Administrative		Category/ Type		86726.54	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
470.55		1770.15		2240.70	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1922.28		7231.42		9153.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) Logan Farms Cafe		Transaction ID : H72B1612FA36B4F0DBED		Allocated Activity or Event:	
Mailing Address 1220 E. Northside Dr. Suite 250				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson State MS Zip Code 39211				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Catering Cost				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 86795.40	
				Date 07 / 15 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.46			54.40		68.86

B. Full Name (Last, First, Middle Initial) Entergy		Transaction ID : H1233BD7B5CBE425CA68		Allocated Activity or Event:	
Mailing Address P. O. Box 8105				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Baton Rouge State LA Zip Code 70891-8105				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Electricity				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 87557.50	
				Date 07 / 28 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.30			339.70		430.00

C. Full Name (Last, First, Middle Initial) City Services Center		Transaction ID : H92785100F052445F88D		Allocated Activity or Event:	
Mailing Address Payment Processing Center P.O. Box 1595				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Jackson State MS Zip Code 39215-1595				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Water/Sewer				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 87557.50	
				Date 07 / 28 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.18			53.32		67.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
118.94		447.42		566.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 OF 33

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A. Full Name (Last, First, Middle Initial) R. J. Young		Transaction ID : HB33E4BFDC2C741728F0		Allocated Activity or Event:	
Mailing Address 809 Division Street				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Nashville State TN Zip Code 37203-4108				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: 001-Equipment Lease				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 87557.50	
				Date 07 / 28 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.57			209.03		264.60

B. Full Name (Last, First, Middle Initial)				Allocated Activity or Event:	
Mailing Address				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement:				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
				Date / /	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)				Allocated Activity or Event:	
Mailing Address				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement:				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/ Type		Allocated Activity or Event Year-To-Date	
				Date / /	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.57		209.03		264.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2371.53	8921.42	11292.95